

PART B - FEE(S) TRANSMITTAL

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34704 7590 11/18/2010

BACHMAN & LAPOINTE, P.C.
 900 CHAPEL STREET
 SUITE 1201
 NEW HAVEN, CT 06510

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

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| (Depositor's name) |
| (Signature) |
| (Date) |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
|-----------------|-------------|----------------------|---------------------|------------------|

10/542,350 04/18/2006 Joel Abadie 05-494 1430

TITLE OF INVENTION: LONGITUDINALLY-STEERABLE STRUCTURE AND ENDOSCOPE COMPRISING SAID STRUCTURE

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|---------------|---------------------|---------------------|------------------|------------|
| nonprovisional | NO | \$1510 | \$300 | \$0 | \$1810 | 02/18/2011 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|----------|----------|----------------|
|----------|----------|----------------|

KASZTEJNA, MATTHEW JOHN 3779 600-152000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.553)

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Bachman & LaPointe, P.C.

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/1122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

CENTRE NATIONAL DE LA RECHERCHE SCIENTIFIQUE, PARIS CEDEX 16, FRANCE and
 ECOLE NATIONALE SUPERIEURE DE MECANIQUE ET DES MICROTÉCHNIQUES, BESANCON, FRANCE

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
☐ Publication Fee (No small entity discount permitted)
☐ Advance Order - # of Copies _____

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

- ☐ A check is enclosed.
☐ Payment by credit card. Form PTO-2038 is attached.
☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 00-0184 (enclose an extra copy of this form)

5. Change in Entity Status (from status indicated above)

- ☐ a Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature /Barry L. Kelmachter #29999/

Date February 15, 2011

Typed or printed name Barry L. Kelmachter

Registration No. 29,999

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